PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

M1817-3

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			12				ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			2 minus 20=		· Ø			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		* Ø			X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				Ì	+140=		OR	+280=	
* If the difference in column 1 is less than zero					r "0" in c	olumn 2	ı	TOTAL	370	OR	TOTAL	
CLAIMS AS AMENDED - PART II								OTHER THAN				
		(Column 1) CLAIMS		(Colu	mn 2) HEST	(Column 3)	Ĺ	SWALL		OR	SIVIALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T.O	-		X42=	,	OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	I CLAIM			+140=		OR	+280=	
								TOTAL			TOTAL	
		,	ADDIT. FEE		10,,	ADDIT. FEE	<u> </u>					
		(Column 1) CLAIMS			ımn 2) HEST	(Column 3)	Г		ADD			ADD:
AMENDMENT B		REMAINING AFTER AMENDMENT		NUN PREV	MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent			=		X42=		OR	X84=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
BEST AVAILABLE COPY								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
			ADDII. I LEI		_ '							
		(Column 1) CLAIMS		HIG	IMN 2) HEST	(Column 3)	r		ADDI-	1		ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY D FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		1	X84=	<u> </u>
Ľ	FIRST PRESE	ULTIPLE DEPENDEN		T CLAIM		1 }		ļ	OR		}	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+280=	
**	** If the entry in column 1 is less than the entry in column 2, write 0 in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
	The "Highest Nun						r fou	and in the app	propriate box	x in co	olumn 1.	